

MB

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SO	91058	1-26-99
O.I.P.E. CLASSIFIER			1-26-99
FORMALITY REVIEW	MB	75303	2-8

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	7	✓	6-1-00
2	2	✓	6-1-00
3	3	✓	6-1-00
4	4	✓	6-1-00
5	5	✓	6-1-00
6	6	✓	6-1-00
7	7	✓	6-1-00
8	8	✓	6-1-00
9	9	✓	6-1-00
10	10	✓	6-1-00
11	11	✓	6-1-00
12	12	✓	6-1-00
13	13	✓	6-1-00
14	14	✓	6-1-00
15	15	✓	6-1-00
16	16	✓	6-1-00
17	17	✓	6-1-00
18	18	✓	6-1-00
19	19	✓	6-1-00
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23	23	✓	6-1-00
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25	25	✓	6-1-00
26	26	✓	6-1-00
27	27	✓	6-1-00
28	28	✓	6-1-00
29	29	✓	6-1-00
30	30	✓	6-1-00
31	31	✓	6-1-00
32	32	✓	6-1-00
33	33	✓	6-1-00
34	34	✓	6-1-00
35	35	✓	6-1-00
36	36	✓	6-1-00
37	37	✓	6-1-00
38	38	✓	6-1-00
39	39	✓	6-1-00
40	40	✓	6-1-00
41	41	✓	6-1-00
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43	43	✓	6-1-00
44	44	✓	6-1-00
45	45	✓	6-1-00
46	46	✓	6-1-00
47	47	✓	6-1-00
48	48	✓	6-1-00
49	49	✓	6-1-00
50	50	✓	6-1-00

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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